Serial No.: 10/663,006 Docket No.: ECV-5662

Amendment dated July 7, 2006

Responsive to the Office Action dated June 6, 2006



REMARKS/ARGUMENTS

Prior to the present Office Action, claims 1-19 were pending. Claims 1-11 have been canceled, and claims 20-22 added. Therefore, claims 12-22 are presently pending.

The Examiner has maintained the restriction under 35 U.S.C. §121 to the following inventions:

- I. Claims 1-11, drawn to a suturing template, classified in class 606, subclass 150.
- II. Claims 12-19, drawn to a method of implanting a heart valve, classified in class 623, subclass 2.11.

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Although Applicant disagrees with the Examiner's determination, invention II, claims 12-19 remains elected, as well as species (i) embodied in Figure 4a.

Claims 12-13 and 15-16 stand rejected under 35 USC §102(e) as being anticipated by Schoon, et al. (USPN 2003/0078651). Applicants respectfully disagrees with the Examiner's reading of Schoon, et al., who only disclose a sizer/marker, and not a suture templare.

Claim 12 includes the ultimate step of attaching the plurality of sutures to the prosthetic valve and fixing the prosthetic valve at a location of the heart that is to receive the prosthetic valve. In this case, the plurality of sutures are those that have been placed through the plurality of notches of the suture template and through the location of the heart. Schoon, et al. disclose that sutures can be used as markers. In each of passages in paragraphs 46, 62, 84, 88, and 90, sutures may be used as guide markers only. These are not sutures that are used to implant the prosthetic heart valve. The Examiner cites paragraph 98 for that step, but there Schoon, et al. only describe placing implant sutures at the *previously formed* dye marks. The sizer/marker has already been removed, and therefore these implant sutures are not passed through the notches.

Applicants respectfully assert that claim 12 describes a method of implanting a prosthetic heart valve using a template that guides the placement of the implantation sutures themselves, and

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remains in place while the implantation sutures are anchored into tissue. This is not the case with Schoon, et al. which merely mentions sutures in conjunction with the sizer/marker as an alternative indicator, much like ink or dye. Accordingly, Applicant believes that claim 12 and its dependents are allowable over Schoon, et al.

Furthermore, Applicant asserts that the Examiner's combination of Schoon, et al. with the suture organizer disclosed in Donlon, et al. (USPN 6,651,671) lacks motivation. In particular, there is no discussion of placing the implant sutures using the sizer/marker of Schoon, et al., let alone utilizing the sizer/marker in conjunction with a suture organizer. Therefore, claims 18 and 19 are believed to be even further distinguished.

New claims 20-22 are added to further emphasize the above distinction.

If there is any further hindrance to allowance, the Examiner is encouraged contact the undersigned by telephone.

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Respectfully submitted

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